

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/763917

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1												
2		1					51	1					
3		2					52	1					
4		2					53	1					
5		1					54		1				
6		1					55	1					
7		1					56	1					
8		1					57		1				
9		1					58	1					
10		1					59		1				
11		1					60		1				
12		1					61		1				
13		1					62						
14		1					63						
15		1					64						
16		1					65						
17		1					66						
18	1						67						
19		1					68						
20		1					69						
21		1					70						
22		1					71						
23		1					72						
24		1					73						
25		1					74						
26		1					75						
27		1					76						
28		1					77						
29		1					78						
30		1					79						
31	1						80						
32		1					81						
33		1					82						
34		1					83						
35		2					84						
36		2					85						
37		1					86						
38	1						87						
39		1					88						
40		1					89						
41		1					90						
42		1					91						
43		1					92						
44	1						93						
45		1					94						
46	1						95						
47	1						96						
48		1					97						
49		1					98						
50	1						99						
TOTAL IND.		↓		↓		↓	TOTAL IND.	14	↓		↓		↓
TOTAL DEP.		←		←		←	TOTAL DEP.	57	←		←		←
TOTAL CLAIMS							TOTAL CLAIMS	65					

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

Barbara Campbell
National Stage Processing
(703) 305-3831